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Examiner Initials*	Cite No.1	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
		Number-Kind Code ² (if known)	MM-DD-YYYY	Applicant of Cited Document		
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Examiner Signature	/Christopher Stone/	Date Considered	01/07/2010
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Substitute for form 1449/PTO				Complete if Known		
Capatitate for form 144011 TO				Application Number	10/559,694-Conf. #3005	
INF	ORMATIC	ON DIS	CLOSURE	Filing Date	May 1, 2006	
STATEMENT BY APPLICANT				First Named Inventor	Wolfgang Kreisel	
				Art Unit	4173	
(Use as many sheets as necessary)			cessary)	Examiner Name	C. R. Stone	
Sheet	2	of	2	Attorney Docket Number	64609(70301)	

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